

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or **Fax** (571)-273-2885

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated, unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

**CURRENT CORRESPONDENCE ADDRESS** (Note: Use Block 1 for any change of address)

24227 7590 08/09/2006

**EMC CORPORATION**  
**OFFICE OF THE GENERAL COUNSEL**  
**176 SOUTH STREET**  
**HOPKINTON, MA 01748**

11/07/2006 RHEBRAH1 00000030 050889 10654852

01 FC:1501 1400.00 DA  
 02 FC:8001 3.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<b>Linda Valanzola</b>	(Depositor's name)
<i>Linda Valanzola</i>	(Signature)
11/6/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/654,852	09/04/2003	Christopher S. MacLellan	EMC-03-066	5274

**TITLE OF INVENTION: METHOD OF AND SYSTEM FOR VALIDATING AN ERROR CORRECTION CODE AND PARITY INFORMATION ASSOCIATED WITH A DATA WORD**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	11/09/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
RIZK, SAMIR WADIE	2133	714-758000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Krishnendu Gupta  
 2 Scott A. Ouellette  
 3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**EMC Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Hopkinton, MA**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 1

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 05-0889 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

**NOTE:** The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Scott A. Ouellette*

Date

11/6/06

Typed or printed name

**Scott A. Ouellette**

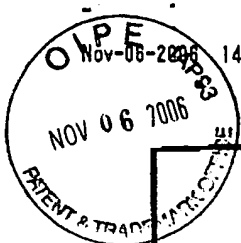
Registration No.

**38,573**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.





Nov-06-2006 14:54

From-EMC LAW DEPARTMENT

5084976915

T-242 P.001/004 F-497

<b>TRANSMITTAL FORM</b>		Application No.:	10/654,852
		Filing Date:	September 04, 2003
		First Named Inventor:	Christopher S. MacLellan
		Confirmation No.:	5274
		Group Art Unit	2133
		Examiner:	Rizk, Samir Wadie
		Customer No.	24227
Total Number of Pages in this Submission:	4	Docket No.	EMC-03-066
<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Fee Authorization for the Commissioner to charge Deposit Account No. 05-0889 for fees associated with this transaction (in duplicate)	<input type="checkbox"/> Assignment <input type="checkbox"/> Recordation Cover Sheet	<input type="checkbox"/> Petition for Revival of an Unintentionally Abandoned Application [37 CFR 1.137(b)] (in duplicate)	
<input type="checkbox"/> Amendment	<input type="checkbox"/> Declaration/Power of Attorney <input type="checkbox"/> Associate Power of Attorney	<input checked="" type="checkbox"/> Form PTOL-85B, Part B - Issue Fee Payment Transmittal, (in duplicate)	
<input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Decl. <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Revocation of Power of Attorney <input type="checkbox"/> Formal Drawings <input type="checkbox"/> Letter to Official Draftsperson with sheets of Formal Drawings, Figs. 1 through , labeled.	<input type="checkbox"/> Fee Transmittal (in duplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Certificate of Mailing or Transmission	
<input type="checkbox"/> Extension of Time Request for Months	<input type="checkbox"/> Copy of PTO 948, "Notice of Draftsperson's Patent Review"	<input type="checkbox"/> Certificate of Express Mail Mailing	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Postcard	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		<input type="checkbox"/> Additional Enclosures:	
<b>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT</b>			
Date <u>11/6/06</u>		<u>Scott A. Ouellette</u> Scott A. Ouellette, Esq. (Reg. No. 38,573) EMC Corporation Office of the General Counsel 176 South Street Hopkinton, MA 01748	
Tel: (508) 293-7835 Fax: (508) 293-7189			
<b>CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8]</b>			
I hereby certify that this correspondence and the above-referenced documents are being:			
<input type="checkbox"/> Deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop: Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
<input checked="" type="checkbox"/> Transmitted by facsimile on the date shown below to the Patent and Trademark Office at (571) 273-2885.			
Date <u>11/6/06</u>		<u>Rizk Valanzola</u> Signature	
		Linda Valanzola Typed or printed name of person signing certificate	

DUPLICATE